

## Medical Home Workgroup Strategic Plan Update – September 2006

Strategies and Activities	Status
<p><b>A. Expand statewide focus on medical home implementation.</b></p> <ol style="list-style-type: none"> <li>1. Increase public awareness and understanding regarding Medical Home concept among providers, families, and other stakeholders.*</li> <li>2. Monitor progress to establish a medical home for children. [existing child health data, Title V CSHCN National Performance Measure 04, SLAITS, etc]</li> <li>3. Increase the overall number of health care practitioners providing a medical home through work with pediatric and family practices to increase care coordination and other medical home characteristics.*</li> </ol>	<ul style="list-style-type: none"> <li>• <b>Texas Early Childhood Comprehensive Systems (TECCS)</b> - The Health and Human Services Commission, Office of Program Coordination for Children and Youth received the Notice of Grant Award for the TECCS Initiative from Maternal and Child Health (\$140,000) and will move forward towards implementation of the TECCS plan. The Office of Early Childhood Coordination is in the process of building a sustainable infrastructure to ensure implementation of the goals, objectives and activities identified within the TECCS plan. Establish four component workgroups consisting of content expert staff, external stakeholders, and family members. (Access to Insurance and Medical Home (AIMH), Social Emotional Development and Mental Health (SEDMH), Early Care and Education (ECE), and Parent Education/Family Support (PEFS)) Establish the Raising Texas Steering Committee (pending HHSC approval) – will consist of agency members with sufficient policy and operational authority to approve policy recommendations, to explore or approve the availability of agency resources as proposed by the component workgroups and to provide guidance in prioritizing and addressing areas requiring cross agency coordination. Proposed membership will include a representative from each HHS agency, Texas Education Agency, Texas Workforce Commission, Office of the Attorney General, and the State Center for Early Childhood Development. In addition, a chair member from each of the four component workgroups will be a member of the Steering Committee. Chair - Dr. Charles Bell, Deputy Executive Commissioner of Health Services in HHSC. Component Workgroup meetings will begin at the end of October and the beginning of November, with the first meeting of the Raising Texas Steering Committee anticipated to be held the first of December 2006. The Raising Texas Initiative, in coordination with Healthy Child Care Texas, will be working with Texas Parent to Parent on including Medical Home Tool Kit materials in training Child Care Health Consultants.</li> <li>• <b>Common Message</b> - There has been discussion with HHSC to develop an official HHSC circular to enable a common message on the Medical Home model throughout the enterprise. An executive circular can serve to promote a common definition, and improved coordination and collaboration around Medical Home.</li> <li>• <b>Medicaid/CHIP Managed Care Organizations (MCO)</b> - 4-06 - Dr. Walker gave a presentation and provided information materials, resources, and tools on Medical Homes to Medicaid/CHIP MCO Medical Directors. Most of the Medical Directors present indicated considerable knowledge regarding medical home concepts and practices, ability to identify and track CSHCN, and to facilitate care coordination for CSHCN. They rated the effectiveness of their organizations' mechanisms to facilitate family involvement and communication with subspecialists somewhat lower. Most indicated that their organizations did not identify and track CSHCN through an EMR system. The Medicaid/CHIP MCO Medical Directors or designated staff were added to the Medical Home Workgroup distribution list.</li> </ul>

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	<ul style="list-style-type: none"> <li>• <b>American Academy of Family Physicians (AAFP)</b> – The AAFP has implemented a quality improvement initiative, known as TransforMed. One Texas clinic, Trinity Clinic in Whitehouse (small family medicine group practice with 3 or fewer physicians) is participating in the 36 practice AAFP initiative that uses a patient-centered model of care to support a strong medical home.</li> <li>• <b>Medical Home brochures</b> were shared at Texas Academy of Family Physicians Annual Session.</li> <li>• <b>TMHP CSHCN Services Program workshops</b> - Medical Home brochures were shared at 12 TMHP “Success with CSHCN Workshops”. Participants shared information through a Quick Medical Home Assessment Questionnaire.</li> <li>• <b>Online provider education</b> – THSteps has initiated an online provider education campaign that will include a module on Medical Home.</li> </ul>
<p><b>B. Increase accessibility of primary care medical home services for children and adolescents and their families.</b></p> <ol style="list-style-type: none"> <li>1. Expand the community-based health care infrastructure – [work with FQHCs and TACHC].</li> <li>2. Increase access to services in rural areas. [?telemedicine]</li> <li>3. Partner with medical and nursing schools.</li> <li>4. Explore alternative approaches to maximizing compensation for operating comprehensive Medical Homes* - Support appropriate reimbursement for services provided within the context of the medical home.</li> <li>5. Create or share tools with providers [referral forms, fax-back]</li> <li>6. Increase continuity of health care for children in the foster care system, including children with special health care needs.</li> </ol>	<ul style="list-style-type: none"> <li>• <b>FQHCs</b> – Meetings are being planned with one to two FQHCs to discuss medical home quality improvements and available tools and resources.</li> <li>• <b>TACHC</b> - Medical home information and materials will be distributed at the Texas Association of Community Health Centers (TACHC) Annual Conference.</li> <li>• <b>Su Clinica Familiar</b> – Medical Home team continues to meet. In process of identifying all CSHCN by color coding on chart. Reviewing options for data management. Use of laptop notebook for care planning, including updating care plans during the appointment with the family. Also, installing a program to help with prescriptions for children with multiple medications. Challenges – maintaining a Social Worker to assist with care planning and coordinating a parent support group.</li> <li>• <b>Reimbursement/Coding</b> – A Clinician Directed Care Coordination Policy (reimbursement of non face to face coordination activities) was developed and is still under review at HHSC.</li> <li>• <b>Medical Home Research</b> - Two Texas health plans (Parkland Community Health Ctr - Dr. Lachman and Texas Children's Hospital - Dr. Giardino) are participating in national research conducted by the Center for Medical Home Improvement. <ul style="list-style-type: none"> <li>• Texas Children's Hospital has six participating practices, and sent surveys to 114 families with a response rate of nearly 25%. A second round of surveys was sent mailed at the beginning of September.</li> </ul> </li> <li>• <b>Senate Bill 6</b> (79th Regular Session) directs HHSC to develop a statewide healthcare delivery model for all children in foster care. The RFP included input related to strengthening medical home requirements.</li> </ul> <p><b>Resources shared –</b></p> <ul style="list-style-type: none"> <li>• American Academy of Pediatrics - Immunization in a Medical Home - training tool to assist health care professionals to immunize children in the context of a medical home.</li> <li>• National Academy of Health Policy - Improving the Delivery of Health Care that Supports Young Children's Healthy Mental Development: Early Accomplishments and Lessons Learned from a Five-</li> </ul>

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	<p>State Consortium, How States are Working with Physicians to Improve the Quality of Children's Health Care, External Quality Review Organizations (EQROs) to promote young children's healthy mental development; and reimbursing pediatric providers for screening for maternal depression.</p> <ul style="list-style-type: none"> <li>• MCH Policy and Research Center - Promising Approaches for Strengthening the Interface Between Primary and Specialty Pediatric Care</li> <li>• Commonwealth Foundation - New Manual on Improving Child Developmental Services in Primary Care Practices</li> <li>• The Medical Home &amp; Early Child Development in Primary Care" - Calvin C. J. Sia, MD, Lynn B. Wilson, PhD, Sharon Taba, MEd</li> </ul>
<p><b>C. Increase partnerships with families, providers, and other stakeholders.</b></p> <ol style="list-style-type: none"> <li>1. Ensure family participation and partnership in coordination of care and in the education and training of health care providers and ancillary staff *- Partner with family organizations. [Family to Family Health Education Center/P2P]</li> <li>2. Continue to provide leadership through the Medical Home Workgroup.</li> </ol>	<ul style="list-style-type: none"> <li>• <b>Texas Parent-to-Parent Annual Conference</b> – Presentations were provided on family-centered care and creating a Medical Home, and transition to adult health care.</li> <li>• <b>Medical Home Family Toolkit</b> - The toolkit, developed by Texas Parent to Parent, and Provider resource - Small Steps, Big Differences, The Medical Home Partnership (new England Serve) were finalized and announced in the May CSHCN Provider Bulletin. <ul style="list-style-type: none"> <li>○ A link to the Toolkit was posted on the Texas Page - AAP National Ctr for Medical Home Initiatives website, TXP2P website, and CSHCN Services Program website.</li> </ul> </li> <li>• <b>Emergency Planning</b> - The Children with Special Health Care Needs (CSHCN) Services Program of the Texas Department of State Health Services recently published a bilingual booklet titled, "Emergency &amp; Disaster Planning for Children with Special Health Care Needs". All clients who receive services or are on the waiting list for the CSHCN Services Program will receive a copy of the booklet in early October. Others can download it for free from <a href="http://www.dshs.state.tx.us/cshcn/Newspace.shtm">http://www.dshs.state.tx.us/cshcn/Newspace.shtm</a>. There is also a direct link to the booklet at <a href="http://www.dshs.state.tx.us/cshcn/pdf/emergency_plan.pdf">http://www.dshs.state.tx.us/cshcn/pdf/emergency_plan.pdf</a>.  The booklet contains a bilingual Emergency Information Form for Children with Special Needs. The form was developed by the American Academy of Pediatrics and adapted by DSHS. The Emergency Information Form can also be downloaded for free from <a href="http://www.dshs.state.tx.us/cshcn/Newspace.shtm">http://www.dshs.state.tx.us/cshcn/Newspace.shtm</a>. There is also a direct link to the Emergency Information Form at <a href="http://www.dshs.state.tx.us/cshcn/pdf/emergency_info_form.pdf">http://www.dshs.state.tx.us/cshcn/pdf/emergency_info_form.pdf</a>. Families were asked to complete and return a brief survey on emergency planning and other aspects of medical home that was included in the packet mailed to clients receiving services or on the waiting list for the CSHCN Services Program.</li> <li>• <b>Newborn Screening</b> – Dr. Rajagoplan had noted challenges regarding children lost to follow-up due to name changes, etc. Dr. Lachman noted that ImmTrac uses different criteria to track children and is able to look-up/track children by various ways (i.e. name, partial name, SS#, birth date, etc). Information shared with the MHWG regarding the client matching methods in ImmTrac.  The Texas Early Hearing Detection and Intervention (TEHDI) program will share the data report for calendar year 2005 at January 2007 Medical Home Workgroup meeting. Final data analysis is done</li> </ul>

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	<p>in October each year for the previous year. (Birth screen information is available within a few months following the end of the year, but it takes up to six months following the birth screen to receive the follow up screening and diagnostic hearing testing and intervention information). Dr. Rajagopalan had some preliminary data in her excellent presentation at the July MHWG meeting.</p> <p>The HRSA Grant at Early Childhood Intervention (ECI) is in its second year, and is currently emphasizing the addition of pediatric audiologists and ECI programs into the TEHDI data system, so that there is more robust information on follow-up hearing testing and arrival at intervention services. Next year the emphasis will be on sharing information and interactions with parents and the medical home. Continuing education modules and educational brochures have been discussed, and the TEHDI program would appreciate receiving information from the MHWG regarding how physicians like to receive information, so that they can interact more effectively.</p> <ul style="list-style-type: none"> <li>• <b>Quality of Care for CSHCN</b> - HHSC has convened meetings of agency representatives to discuss measurements of quality of care for CSHCN in response to letters and requests by TPS for HHSC to gather and analyze data on the quality of care being provided to CSHCN and their families across agency programs.</li> <li>• <b>MHWG Quarterly Meetings</b> <ul style="list-style-type: none"> <li>○ 4/10/06</li> <li>○ 7/10/06 – Presentation on early hearing detection and intervention in the medical home</li> </ul> </li> </ul>
<p><b>D. Improve Infant and Child Health Surveillance and Screening Programs in conjunction with THSteps. *</b></p>	<ul style="list-style-type: none"> <li>• A link to CSHCN Medical Home web page and Medical Home brochures added to Texas Health Steps website</li> <li>• 7/06 – Information on Medical Homes was presented to Regional THSteps Coordinators and Directors of Social Work Services.</li> <li>• Medicaid - Autism Screening &amp; Neurological Psychiatric testing reviewed at the Public Assistance Health Benefits Review and Design Committee meeting in April. Effective May 06, autism screening is paid as 96110 at \$9.81 for the service. Neurological Psychiatric Testing (also effective May 06) fee (WISSR) can be filed as 96118 and is reimbursed at \$51.00.</li> <li>• Resources shared - Nat'l Academy for State Health Policy - Resource Guide for Developmental Screening in Primary Care Practices, First Signs – tools and information to improve screening and referral practices and to lower the age at which young children are identified with autism and other developmental disorders.</li> </ul>
<p><b>E. Strengthen preventive health services and transition programs for adolescents.</b></p> <p>1. Identify opportunities to educate providers of adult care on treating young adults with chronic conditions.</p>	<ul style="list-style-type: none"> <li>• <b>Articles published</b> – Two articles related to “Intermediate and Advanced Transition Training” were published in the CSHCN Family Newsletter. Please check with Kathy regarding the info for this section.</li> <li>• <b>Online provider education</b> – THSteps developed an online provider education module on Transition for case managers.</li> </ul>

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<p>2. Work with medical associations, primary care associations, and others to identify medical providers trained in adolescent health and special health care needs.</p>	

\* Specifically addressed in the Texas Early Childhood Comprehensive Systems Initiative component plan – “Access to Insurance and Medical Home”.